

MOPAC Agenda

- ☆ Advocate for PLI Reform
- ☆ Improve Medicaid timely payments for services rendered
- ☆ Continue to monitor and decrease the administrative burden of the MaineCare Prior Authorization Process
- ☆ Monitor the appropriate use of the Prescription Monitoring Program for live web-based use
- ☆ Monitor all aspects of the Dirigo Health Agency initiatives – i.e. Performance Measures through the Maine Quality Forum, and the State Health Plan initiatives

I Want to be a Voice in Augusta

☆ *I'll make a Commitment to Osteopathic Medicine* ☆

MOPAC Contribution Form

☆ **BILL MY CREDIT CARD** ☆

Donate to MOPAC by monthly Credit card payments until you say "STOP." This makes your political Contribution painless. To contribute monthly, please fill out the information below.

Please bill me *monthly* for (circle one)

\$100 \$75 \$50 \$25 \$10

I'll set the amount: \$ _____

☆ **ONE TIME CONTRIBUTION** ☆

Some members like to give contributions once a year. Some even like to do it more frequently. To contribute please fill out the information below.

Enclosed is payment for (circle one)

\$500 \$250 \$100 \$75 \$50

I'll set the amount: \$ _____

NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

Please charge my MOPAC contribution to:



Credit Card Number: _____ Exp. Date: ___/___/___ ID #: _____ (last 3 digits on back of card)

Name on card: _____ Signature: _____

Please mail to: **MOPAC, 693 Western Ave., #1, Manchester, ME 04351** or Fax: **207-623-4228**

Thank you for your support. For more information call: 207-623-1101 or email: kmiller@mainedo.org

MOPAC contributions are not deductible on federal tax and may not be made by a corporation
All contributions will be reported to the Maine Ethics Commission in accordance with state law.